

FRONTIERS EXTENDED DAY ENRICHMENT PROGRAM

The After-School Program of Rankin County School District

135 S College Street • Brandon, MS 39042 • 601-825-9714 • Fax 601-824-2900 • www.rcsd.ms/frontiers

Dominique L. Hoard, Administrator

Dear Applicant:

Thank you for your interest in the Frontiers Extended Day Enrichment Program with Rankin County School District. We are always interested in receiving applications and talking to applicants for positions with Frontiers.

The following information will aid you in successfully completing this application and understanding the process that is required.

1. Please PRINT and make sure everything is legible.

2. Position and Qualifications Required:

- Instructor High School Diploma or GED
- High School Aide High School Senior; At least 16 years old; daily early dismissal (Early dismissal on alternate block days limits applicant to substitute status)
- Substitute High School diploma or GED (unless applying as a High School Aide substitute)
- Basic hours for ALL positions are 1:30 pm until 6:00 pm on the school calendar; actual times will depend on Frontiers site assignment. Site preferences are considered; not guaranteed.

3. Employment Experience

Give complete information in each column as asked.

4. References

List four references. Complete information on email addresses and telephone numbers is REQUIRED for each reference. DO NOT LIST RELATIVES.

5. Employment with Frontiers requires the following:

- ❖ Your **ORIGINAL** Social Security card card must be signed and cannot be a copy
- A valid Driver's License or current Passport or most recent report card (high school and college students without a Driver's License) or state ID card or college ID card, with photo or Native American Tribal Document, if applicable.

6. Completion of Background Check and Child Abuse Registry- applicants 18+ years old

- All Background Checks require that Fingerprinting be done by Frontiers/RCSD. We cannot accept Background checks performed by any other agency.
- There is a \$40 CASH ONLY fee required for fingerprinting, payable at processing. Do not bring children with you. They WILL NOT be able to accompany you during the interview, paperwork completion, or fingerprinting/processing.

Again, thank you for your interest in Frontiers. All applicants will be considered; however, only selected applicants will be interviewed. Applications will be kept on file for one school year.



FRONTIERS

Extended Day Enrichment Program

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EMPLOYMENT APPLICATION FOR CLASSIFIED STAFF

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(3) List any special certific	ates/training y	ou ha	IV e : _								
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RANKIN COUNTY SCHOOL DISTRICT DOES NOT DISCRIMINATE ON THE BASIS OF AGE, SEX, RACE, RELIGION, HANDICAP OR NATIONAL ORIGIN.

All applicants will be considered; however, only selected applicants will be interviewed.

EMPLOYMENT EXPERIENCE:

Name of Employer	City & State	Type of Work	Reason for Leaving Position	Dates of Service From (Month & Year) To
Wanter State Control				
lave you ever been asked to re	esign, been discharged	, or failed to be rehired	d? [] Yes [] No	lf Yes, explain:
lave you ever been charged wire [] Yes [] No f Yes, please explain in detail the natussociated with each offense or crime	ure of the offense, the date	you were arrested or char		-
lave you ever been charged wit f Yes, please explain:			ninal sexual offense?	[] Yes [] No
Are you a citizen of the United S	States? [] Ye	s [] No		
List any specific experience y	ou have in working wi	ith children:		
Why are you Interested in wor	rking for Frontiers?			
*				
-				
List anyone you know who cu	ırrently works for Fron	tlers or has worked fo	r Frontiers in the past	

REFERENCES:

PLEASE PRINT the name, position, email address and phone number(s) of four (4) references, including supervisors under whom you have worked. If you do not have previous work experiences, list those that have known you for a long time and can attest to your character. **DO NOT LIST RELATIVES.**

Complete information on each reference is needed to process your application.

NAME	OFFICIAL POSITION/ RELATIONSHIP	EMAIL ADDRESS (required)	TELEPHONE NUMBER (required)

READ CAREFULLY AND SIGN THE FOLLOWING STATEMENT:

By my signature I attest that the information contained in this application is true and represents me accurately. If employed, I agree to abide by all the policies approved by the Rankin County Board of Education and will cooperate fully with in-service training for improvement as required by Frontiers. I understand that all applicants will be considered; however, only selected applicants will be interviewed. I understand that this application will remain in the active file for a period of one year and will then be classified as inactive unless I notify the Frontiers Director in writing to keep the application current.

I give my permission for the Rankin County School District to conduct a background screening check with any law enforcement agency, the Child Abuse Central Registry, previous employers, and any other persons, corporation, or public agencies or entities to determine my suitability in working with children and my past employment history. I understand that this permission is a part of my application for a position with the Rankin County School District. I understand that should any felony or misdemeanor charges or convictions appear on my record which I have not previously disclosed in writing to the Rankin County School District, then Frontiers shall have the right to deny me employment and I do hereby agree to immediately resign from my position or employment and accept immediate termination, without a hearing, the same being hereby waived.

I do further agree and direct that said agencies, previous employers or companies may release to Rankin County School District any and all personnel files or factual information or written documentation concerning any civil or criminal charge or conviction or facts related thereto as may be on file with such agency.

	Please Print Name			
Date FOR FRONTIERS USE ONLY:	Signature			